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Commission on the Status of Women
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Follow-up to the Fourth World Conference on Women and to the special session of the General Assembly, entitled "Women 2000: gender equality, development and peace for the twenty-first century"

Lesotho:* draft resolution

Women, the girl child and HIV/AIDS

The Commission on the Status of Women,

Reaffirming the Beijing Declaration[1] and Platform for Action,[2] the outcome documents of the twenty-third special session of the General Assembly,[3] the Programme of Action of the International Conference on Population and Development,[4] the Declaration of Commitment on HIV/AIDS,[5] adopted by the General Assembly at its twenty-sixth special session in 2001, the HIV/AIDS-related goals contained in the United Nations Millennium Declaration of 2000[6] and the Millennium Development Goals, in particular the aim of Member States to have halted, by 2015, and begun to reverse, the spread of HIV/AIDS,

Recalling the commitment from the 2005 World Summit of developing and implementing a package for HIV prevention, treatment and care, with the aim of coming as close as possible to the goal of universal access to treatment by 2010 for all those who need it,

* On behalf of the States Members of the United Nations that are members of the Southern African Development Community.

[1] *Report of the Fourth World Conference on Women, Beijing, 4-15 September 1995* (United Nations publication, Sales No. E.96.IV.13), chap. I, resolution 1, annex 1.

[2] Ibid., annex II.

[3] General Assembly resolution S-23/2, annex, and resolution S-23/3, annex.

[4] See *Report of the International Conference on Population and Development, Cairo, 5-13 September 1994* (United Nations publication, Sales No. E.95.XIII.18), chap. I, resolution 1, annex.

[5] General Assembly resolution S-26/2, annex.

[6] See General Assembly resolution 55/2.

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Also recalling all previous resolutions on this subject,

Acknowledging that prevention, care, support and treatment for those infected and affected by HIV/AIDS are mutually reinforcing elements of an effective response that must be integrated into a comprehensive approach to combat the epidemic,

Taking note of the Guidelines on HIV/AIDS and Human Rights, as adopted by the Second International Consultation on HIV/AIDS and Human Rights,[7]

Recognizing the need to ensure the respect, protection and fulfilment of human rights in the context of HIV/AIDS,

Recognizing also that populations destabilized by armed conflict, humanitarian emergencies and natural disasters, including refugees, internally displaced persons and, in particular, women and children, are at an increased risk of exposure to HIV infection,

Deeply concerned that the global HIV/AIDS pandemic disproportionately affects women and girls and that the majority of new HIV infections occur among young people,

Concerned that the vulnerability of women, girls and adolescents to HIV/AIDS is increased by their unequal legal, economic and social status, including poverty as well as other cultural and physiological factors, violence against women and girls and adolescents, early marriage, forced marriage, premature and early sexual relations, commercial sexual exploitation and female genital mutilation,

Also concerned that HIV infection rates are at least twice as high among young people, especially young and married women, who do not finish primary school as among those who do,

Further concerned that women and girls have different and unequal access to the use of health resources for the prevention and treatment of HIV/AIDS,

1. *Stresses with deep concern* that the HIV/AIDS pandemic, with its devastating scale and impact on women and girls, requires urgent action in all fields and at all levels;

2. *Stresses* that gender equality and the political, social and economic empowerment of women and girls are fundamental elements in the reduction of their vulnerability to HIV/AIDS and are essential to reversing the pandemic;

3. *Expresses its concern* that the HIV/AIDS pandemic reinforces gender inequalities, that women and girls bear a disproportionate share of the burden imposed by the HIV/AIDS crisis, that they are more easily infected, that they bear the disproportionate burden to care for and support those infected and affected by the disease and that they become more vulnerable to poverty as a result of the HIV/AIDS crisis;

4. *Reaffirms* the need for Governments, supported by the relevant actors, including civil society, to intensify national efforts and international cooperation in the implementation of the commitments contained in the Declaration of Commitment on HIV/AIDS,[5] the Beijing Platform for Action[2] and the Programme of

[7] E/CN.4/1997/37, annex I.

Action of the International Conference on Population and Development,[4] and to work towards effectively reflecting in their national policies, strategies and budgets the gender dimension of the pandemic, in line with the time-bound goals of the Declaration and the Platform for Action;

5. *Also reaffirms* the commitment to achieve universal access to reproductive health by 2015, as set out in the Programme of Action of the International Conference on Population and Development, integrating this goal into strategies to attain internationally agreed development goals, including those contained in the United Nations Millennium Declaration[6] aimed at reducing maternal mortality, improving maternal health, reducing child mortality, promoting gender equality, combating HIV/AIDS and eradicating poverty;

6. *Urges* Governments to take all necessary measures to create an enabling environment for the empowerment of women, to strengthen their economic independence and to protect and promote their full enjoyment of all human rights and fundamental freedoms, in order to enable them to protect themselves from HIV infection;

7. *Urges* Governments and other relevant stakeholders to address the challenges faced by older women caring for people living with or affected by HIV/AIDS, including orphaned grandchildren;

8. *Emphasizes* the need to strengthen policy and programme linkages and coordination between HIV/AIDS and sexual and reproductive health and their inclusion in national development plans, including poverty reduction strategies and sector-wide approaches where they exist, as a necessary strategy for fighting the HIV/AIDS pandemic and mitigating its impact on the population, which could result in more relevant and cost-effective interventions with greater impact;

9. *Urges* Governments to strengthen initiatives that would increase the capacities of women and adolescent girls to protect themselves from the risk of HIV infection, principally through the provision of health care and health services, including for sexual and reproductive health, in accordance with the Programme of Action of the International Conference on Population and Development, and that integrate HIV/AIDS prevention, treatment and care and include voluntary counselling and testing, and through prevention education that promotes gender equality within a culturally and gender-sensitive framework;

10. *Also urges* Governments to ensure accessible and affordable procurement of prevention commodities, in particular microbicides and male and female condoms, to ensure that their supply is adequate and secure;

11. *Reminds* States to consider that flexibilities in trade-related intellectual property rights can be used by States when necessary to protect public health and address public health crises;

12. *Urges* Governments, where they have not yet done so, to institute and ensure the enforcement of laws to protect women and girls from early and forced marriage and marital rape;

13. *Also urges* Governments to expand access to treatment, in a progressive and sustainable manner, including the prevention and treatment of opportunistic diseases and effective use of antiretroviral medication and to promote access to low-cost effective drugs and related pharmaceutical products, in particular for women and girls;

14. *Further urges* Governments to ensure that women and girls have equitable and sustained access to treatment for HIV/AIDS and opportunistic infections, appropriate to their age, health and nutritional status, with the full protection of their human rights, including their reproductive rights and sexual health, in accordance with, inter alia, the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and other relevant international human rights instruments, and to protection from coerced sexual activity, and to monitor access to treatment by age, sex, marital status and continuity of care;

15. *Requests* Governments to provide equal access for women and men throughout their life cycle to social services related to health care, including education, clean water and safe sanitation, nutrition, food security and health education programmes, especially for women and girls living with and affected by HIV/AIDS, including treatment for opportunistic diseases;

16. *Calls upon* Governments to intensify efforts to eliminate all forms of discrimination against women and girls in relation to HIV/AIDS, including through challenging gender stereotypes, stigmatization, discriminatory attitudes and gender inequalities, and to encourage the active involvement of men and boys in this regard;

17. *Urges* Governments to strengthen legal, policy, administrative and other measures for the prevention and elimination of all forms of violence against women and girls, including harmful traditional and customary practices, abuse, early and forced marriage, rape, including marital rape, and other forms of sexual violence, battering and trafficking in women and girls, and to ensure that violence against women is addressed as an integral part of the national HIV/AIDS response;

18. *Stresses* that women should be empowered to protect themselves against violence and, in this regard, that women have the right to have control over and decide freely and responsibly on matters related to their sexuality, including their sexual and reproductive health, free of coercion, discrimination and violence;

19. *Calls upon* all Governments and the international donor community to integrate a gender perspective in all matters of international assistance and cooperation and to take measures to ensure that resources concomitant with the impact of HIV/AIDS on women and girls are made available, in particular in funding provided to national HIV/AIDS programmes to promote and protect the human rights of women and girls in the context of the epidemic, and to achieve the gender-related goals found, inter alia, in the Declaration of Commitment on HIV/AIDS;

20. *Calls upon* Governments to integrate HIV prevention, voluntary counselling and testing of HIV into other health services, including sexual and reproductive health, family planning, maternity and tuberculosis services, as well as the provision of services for the prevention and treatment of sexually transmitted infections in the maternal to child transmission services for pregnant women infected by HIV;

21. *Encourages* the continued collaboration among the co-sponsors of the Joint United Nations Programme on HIV/AIDS, the Global Fund to Fight HIV/AIDS, Tuberculosis and Malaria and other international organizations to address and reduce the spread of sexually transmitted infections and HIV/AIDS, in

particular in the context of emergency situations and as part of humanitarian efforts, and to seek actively the achievement of results for women and girls, and also encourages the mainstreaming of a gender perspective throughout their work;

22. *Requests* the Joint United Nations Programme on HIV/AIDS and its co-sponsors, other United Nations agencies responding to the HIV/AIDS pandemic, as well as the Global Fund to Fight HIV/AIDS, Tuberculosis and Malaria, to integrate a gender and human rights perspective throughout their HIV/AIDS-related operations, including policy, planning, monitoring and evaluation, and to ensure that programmes and policies are developed and are adequately resourced to address the specific needs of women and girls;

23. *Requests* the Secretary-General, in a follow-up to his December 2005 letter to the United Nations Resident Coordinators on the establishment of joint United Nations teams on AIDS at the country level, to request the United Nations Development Programme, as lead agency on technical support on gender and human rights within the Joint United Nations Programme on HIV/AIDS, to develop the HIV-related gender and human rights capacity for all United Nations staff providing technical assistance to Governments, to advance the national response to AIDS and to report on these efforts in 2008;

24. *Encourages* the United Nations to continue to support national monitoring and evaluation mechanisms in the context of the "three ones" principles, to enable the production and dissemination of comprehensive and timely information on the gender dimension of the pandemic, including through the collection of data disaggregated by sex, age and marital status, and in raising awareness about the critical intersection between gender inequality and HIV/AIDS;

25. *Requests* the Secretary-General to invite Member States to work in partnership with the Global Coalition on Women and HIV/AIDS, convened by the Joint United Nations Programme on HIV/AIDS and its partners, to mobilize and support a wide range of national actors, including women's groups and networks of women living with HIV/AIDS, to ensure that national HIV/AIDS programmes are better able to respond to the specific needs and vulnerabilities of women and girls;

26. *Urges* Governments to rapidly scale up access to treatment programmes to prevent mother-to-child transmission of HIV and to encourage men to participate with women in programmes designed to prevent mother-to-child transmission, to encourage women and girls to participate in these programmes and to provide sustained treatment and care after pregnancy;

27. *Encourages* the design and implementation of programmes to encourage and enable men, including young men, to adopt safe, non-coercive and responsible sexual and reproductive behaviour and to use effective methods to prevent the transmission of HIV/AIDS;

28. *Stresses* the importance of ensuring that young men and women have access to information and education, including peer education, and youth-specific HIV education, sexual education and services necessary for behavioural change, to develop the life skills required to reduce their vulnerability to HIV infection and reproductive ill health, in full partnership with young persons, parents, families, educators and health-care providers;

29. *Calls* for enhanced efforts by all relevant actors to include a gender perspective in the development of HIV/AIDS programmes and policies and in the training of personnel involved in implementing such programmes, including by focusing on the role of men and boys in addressing HIV/AIDS;

30. *Encourages* Governments and all other relevant actors to promote funding, both domestically and externally, and support and expedite action-oriented research leading to affordable methods controlled by women to prevent HIV/AIDS and other sexually transmitted diseases, including microbicides and vaccines, and research on strategies that empower women to protect themselves from sexually transmitted diseases, including HIV/AIDS, and methods of care, support and treatment for women of various ages, and to promote their involvement in all aspects of such research;

31. *Also encourages* Governments to increase the provision of resources and facilities to women who find themselves having to provide care and/or economic support for those infected with HIV/AIDS or affected by the pandemic, and for the survivors, particularly children and older persons, utilizing funds earmarked for care and support to reduce women's disproportionate burden of care;

32. *Urges* Governments to continue to promote the participation and the significant contribution of people living with HIV/AIDS, young people and civil society actors in addressing the problem of HIV/AIDS in all its aspects, including promoting a gender perspective, and to promote their full involvement and participation in the design, planning, implementation and evaluation of HIV/AIDS programmes, as well as in creating an enabling environment to combat stigmatization;

33. *Welcomes* the financial contributions made to date to the Global Fund to Fight AIDS, Tuberculosis and Malaria, urges further contributions to sustain the Fund, and calls upon all countries to encourage the private sector to contribute to the Fund;

34. *Reaffirms* the need for Governments, supported by relevant actors, and all stakeholders, including civil society and the private sector, to intensify national efforts and international cooperation in the implementation of the Declaration of Commitment on HIV/AIDS;

35. *Stresses* the importance of building up national competence and capacity to provide an assessment of the impact of the epidemic, which should be used in planning for prevention, treatment and care, and for addressing HIV/AIDS;

36. *Urges* the international community to complement and supplement, through increased international development assistance, efforts of the developing countries that commit increased national funds to fighting the HIV/AIDS pandemic, especially to address the needs of women and girls, particularly those countries most affected by HIV/AIDS, particularly in Africa, especially sub-Saharan Africa, and in the Caribbean, countries at high risk of expansion of the HIV/AIDS epidemic and countries in other affected regions whose resources for dealing with the epidemic are seriously limited;

37. *Decides* to consider this question further at its fifty-second session.